Telephone: (703) 836-6400 Facsimile: (703) 836-2787

PATENT APPLICATION

Attorney Docket No.: _118571

CUSTOMER NUMBER 25944

In re the Application of

Shougo SATO

Application No.: 10/772,404

Filed:

February 6, 2004

For:

IMAGE FORMATION APPARATUS AND PROCESS CARTRIDGE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Entitlement to small entity status is hereby asserted.
- Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)		
10 mm 1 m	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		
TOTAL CLAIMS	*48 MINUS	**47	= 1		
INDEP CLAIMS	*4 MINUS	***4	= 0		
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					

SMALL ENTITY				
	RATE	ADD'L FEE	വ	
	x 25	\$		
	x 100	\$		
	+ 180	\$	ב	
		s		

AMENDMENT TRANSMITTAL

Group Art Unit: 2852

Examiner: Q. GRAINGER

OTHER THAN A						
S	SMALL ENTITY					
R		ADD'L				
<u> </u>	RATE	'	FEE			
- 1		-				
	x 50	\$	50			
	x 200	\$				
⊇R.	+ 360	\$				
		\$	50			

OTHER THAN A

- If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 193581 in the amount of \$50 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461.

Respectfully submitted,

James A. Dliff

Registrafion No. 27,075

Jesse O. Collier Registration No. 53,839

JAO:JOC/ldg Date: June 8, 2007